PATENT APPLICATION FEE DETERMINATION RECORD

Effective October 1, 2003

Application or Docket Number

10711009

CLAIMS AS FILED - PART I						SMALL ENTITY				OTHE	OTHER THAN	
			(Column 1)		(Column 2)		7	TYPE		OF		ENTITY
TOTAL CLAIMS			1/6	16				RATE	FEE		RATE	FEE
FOR			NUMBER FILED		NUMBER EXTRA			BASIC FE	€ 385.0	0 OF	BASIC FEI	770.00
TOTAL CHARGEABLE CLAIMS			// minus 20=		· D			X\$ 9=		OF	X\$18=	
INDEPENDENT CLAIMS			/ minus 3 = **		*	0		X43=		OR	X86=	
MULTIPLE DEPENDENT CLAIM PRES								+145=		OR		
* If the difference in column 1 is less				ero, enter	"0" in d	column 2	Į	TOTAL		OR	L	277
CLAIMS AS AMENDED - PART II								*			OTHER	THAN
		(Column 1)		(Colum	ın 2)	(Column 3)		SMALL	ENTITY	OR	SMALL	
AMENDMENT A		CLAIMS REMAINING AFTER AMENDMENT		HIGHE NUMB PREVIOI PAID F	ER USLY	PRESENT EXTRA		RATE	ADDI- TIONAI FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent		Minus			=	Ī	X43=		OR	X86=	
	FIRST PRESI	ENTATION OF M	ULTIPLE DE	PENDENT	CLAIM		Ī	+145=		OR	+290=	
							L	TOTAL		-	TOTAL	
		(Column 1)		(Columi	n 2)	(Column 3)	A	DDIT. FEE			ADDIT. FEE	
AMENDMENT B		CLAIMS REMAINING AFTER AMENDMENT	•	HIGHE NUMBE PREVIOL PAID FO	ST ER JSLY	PRESENT EXTRA	Γ	RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total	*	Minus	**		=		X\$ 9=		OR	X\$18=	
	Independent	*	Minus	***		= .	╁	X43=		OR	X86=	
	FIRST PRESE	NTATION OF MU	JLTIPLE DEF	PENDENT C	LAIM		\vdash	•		┨╩┨		
								+145=	·	OR	+290=	•
		•				•	AE	TOTAL DIT. FEE		OR ,	TOTAL ODIT. FEE	
		(Column 1)		(Column		(Column 3)	٠.					·
I LI	`	CLAIMS REMAINING AFTER AMENDMENT		HIGHES NUMBE PREVIOUS PAID FO	R SLY	PRESENT EXTRA		RATE	ADDI- TIONAL FEE		RATE	ADDI- TIONAL FEE
	Total .	*	Minus	##		=		X\$ 9=		OR	X\$18=	
	ndependent		Minus	***		=	\vdash	X43=			X86=	
1	FIRST PRESENTATION OF MULTIPLE DEPENDENT CLAIM						-			OR	700-	
	ha amen.:! -	- 4 in lane were				_	1	145=		OR	+290=	أ
 If 1	If the entry in column 1 is less than the entry in column 2, write "0" in column 3. If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, enter "20." If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, enter "3."									OR A	TOTAL DDIT. FEE	
II	ne mignest Num e "Highest Numi	nber Previously Pai ber Previously Paid	or For" IN THIS For" (Total or	SPACE is le Independent)	ss than is the h	3, enter "3." ighest number f			opriate box		•	